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Looking Ahead: 2012 Updates to the Department of Defense Nonappropriated Fund Health Benefits Program



It's that time of year again!

Welcome to Open Enrollment — a time to learn about plan changes and get a fresh perspective on the value of your DoD NAF Health Benefits Program with Aetna. It's also a time to make changes to your health benefit elections, if needed, to bring them into line with your personal and family needs.

Be sure to read this newsletter carefully. It has important information and reminders to help you understand and make the best use of your benefits and live healthier.

Open Enrollment: October 31 to November 30

Open Enrollment is your opportunity to make changes to your health benefit elections.

Here's what you can do:

- Join the DoD NAF Health Benefits Program if you aren't already enrolled.
- Switch plans. For example, if you're currently enrolled in another health plan, you may switch to the DoD NAF Health Benefits Program.
- Retirees who are currently enrolled in *Tri-Care for Life* may switch to the DoD NAF Health Benefits Program.
- Add or remove dependents from your coverage. Be sure to read the article on page 3 to learn how the definition of an eligible dependent will be expanding in 2012. Retirees should contact their assigned Human Resources Office for more information about adding dependents to their plan.

Everything you need to complete the enrollment process is included in this Open Enrollment package.

If you are not making any changes to your medical and dental plan elections, you do not have to complete the enrollment process. Please read the enclosed information to learn about changes and updates to your plan.

*Your Life,
Your Health*

Who's Really Paying Your Health Care Bills?

Understanding cost sharing in your health plan

Does that trip to the doctor really cost just \$20? Under your DoD NAF plan, that \$20 copay doesn't reflect the true cost of the visit, which could be as much as \$300. Who pays the difference? You may be surprised to know that it's your DoD NAF employer. The DoD NAF Health Benefits Program is self-funded, which means your employer pays your medical claims through Aetna, our plan administrator. As health care costs continue to increase, claim costs increase as well — and so does the cost of coverage itself (called premiums).

When costs increase, so does your share of those costs. You share in two ways:

- **Premiums.** Through regular contributions, you share in the cost of your medical coverage. You pay 30% and your NAF employer pays 70% of your premium.
- **Out-of-pocket costs.** You share in the cost of the care you receive by meeting the annual deductible and paying coinsurance and/or copays.

Why is this important to know? In 2012, you will pay a higher premium for medical coverage and a higher medical deductible. It's important to understand why this is happening (higher medical costs). It's also important to know that even though your share of costs will increase, your DoD NAF employer still pays a larger share of your health care bills. When you take action to save on health care — for example, by understanding your health risks and what you can do about them — you are helping to slow down runaway costs and keep health care affordable for everyone.



2012 Medical and Dental Plan Changes

★ Medical Deductible

The annual medical deductible will increase as shown below:

Aetna Open Choice® PPO Plan

<i>If you elect coverage for:</i>	<i>Your 2012 deductible will be:</i>
Individual	\$300 in-network; \$900 out-of-network
Family of 2	\$600 in-network; \$1,800 out-of-network
Family of 3 or more	\$900 in-network; \$2,700 out-of-network

Aetna Traditional Choice® Plan, including Aetna International

<i>If you elect coverage for:</i>	<i>Your 2012 deductible will be:</i>
Individual	\$300
Family of 2	\$600
Family of 3 or more	\$900

★ Emergency Room Copay

The hospital emergency room copay for 2012 will be as follows:

- **Aetna Open Choice PPO Plan:** Increasing from \$200 to \$350 for both in-network and out-of-network facilities. The copay is waived if you are admitted to the hospital.
- **Aetna Traditional Choice Plan, including Aetna International:** No change. Benefit will continue to be 80% after deductible.

★ Urgent Care Facility Copay

The urgent care facility copay for 2012 will be as follows:

- **Aetna Open Choice PPO Plan:** Decreasing from \$35 to \$20 for in-network facilities; staying the same for out-of-network facilities (60% after deductible).
- **Aetna Traditional Choice Plan, including Aetna International:** No change. Benefit will continue to be 80% after deductible.

★ Hearing Aid Maximum Benefit

The hearing aid maximum benefit for Open Choice, Traditional Choice and Aetna International plans will increase from a \$1,000 lifetime maximum benefit to \$3,000 (after deductible and coinsurance) every 3 years.

★ Dental Maximum Benefit

The annual maximum benefit will increase from \$2,000 to \$2,500. This change does not apply to the Stand Alone Dental Plan.

Health Incentive Credit

Take the health assessment and get a routine physical exam to lower your deductible or coinsurance



In 2011, we introduced the Health Incentive Credit, a way to reduce your deductible or coinsurance by taking healthy actions. The credit will again be available in 2012, with a change to the way it's earned.

For employees, retirees and dependents over age 18

You and your dependents over age 18 can earn a Health Incentive Credit of up to \$100 in 2012 by taking two actions. You may earn \$50 when you complete the Simple Steps To A Healthier Life® online health assessment, available at Aetna Navigator® (www.aetna.com), and \$50 when you receive a routine physical exam (well-adult or well-woman exam).

For dependents under age 18

Dependents under age 18 can earn \$100 by having a well-child exam.

Maximum credits

In 2012, an individual may earn up to \$100 in Health Incentive Credits; the family maximum is \$300. Credits are automatically applied to your deductible or coinsurance when you complete any of the actions described above. Credits roll over to the next plan year (for up to 3 years) if you are not able to use them during 2012.

NEW! Expanded Dependent Eligibility

The DoD NAF Health Benefits Program is expanding the definition of eligible dependents. During the Open Enrollment period, you may enroll newly eligible dependents for coverage beginning January 1, 2012.

■ Adult children up to age 26

In accordance with the Patient Protection and Affordable Care Act (Health Care Reform), young adults are allowed to stay on their parents' plan until they turn 26 years old. As a result, you may enroll your adult child in the plan even if your child is no longer living with you, is no longer a student, and *whether or not coverage is available through their own employer's health plan or a health plan sponsored by a spouse's employer*. Both married and unmarried young adults can be covered up to age 26, but coverage does not extend to their spouses or children. Supporting documentation to validate the parent-child relationship will be required.

■ Same Sex Domestic Partners

Same Sex Domestic Partners and their eligible children may be enrolled in the plan. Supporting documentation to validate the relationship will be required. The tax treatment of the cost of the health coverage will follow IRS guidelines.

Contact your supporting Human Resources Office for information about adding dependents to your plan.

Still smoking? Get help to quit for life.

Expanded coverage for smoking cessation medications

It's a fact: Smokers who get help are more likely to quit for good. It's also a fact that different strategies work for different people. If you're still smoking, there's help at hand from your DoD NAF Health Benefits Program. Now you can find and afford the combination of tobacco cessation medication and counseling that works best for you.

The program's enhanced tobacco cessation benefits include full coverage (no copayments) for a 180-day supply of the following FDA medications that can ease withdrawal symptoms and help you succeed in quitting:

- Bupropion SR
- Nicotine gum
- Nicotine inhaler
- Nicotine lozenge
- Nicotine nasal spray
- Nicotine patch
- Varenicline



To take advantage of this benefit, you must get a prescription from your doctor.

Your preventive care benefits will continue to cover eight smoking cessation counseling sessions every 12 months. For more information about your pharmacy and counseling benefits, call Aetna Member Services at **1-800-367-6276**. For Aetna International, call **1-888-506-2278**.



Use Generic Drugs and Save

Ask your doctor about generic equivalents for the medications you take

It's a fact that using generic medications can save you money. Generics are chemically identical to their name-brand counterparts, but they cost significantly less. If you're currently taking brand-name medications or your doctor prescribes a new drug, be sure to ask if a generic is available. Keep in mind, too, that many well-known brand-name drugs become available as generics after a certain period of time on the market. Here are just a few popular brand-name drugs recently approved as generics:

- Lipitor® (for high cholesterol): Fall 2011
- Zyprexa® (for depression): Fall 2011
- Plavix® (for heart disease): 2012

If you're using the brand-name version of these drugs, you are paying \$20 for a 30-day supply. By switching to the generic equivalent, you'll pay just \$10 for a 30-day supply. Use the mail-order service and you'll save even more: a 90-day supply of generic medication costs \$20. To get started with the mail service, visit Aetna Navigator at www.aetna.com or call 1-866-612-3862 (toll free).



Aetna Navigator: Are you on board?

If you haven't registered, do it today!

Aetna Navigator is your member-only, secure website — a great online resource for viewing claims, accessing consumer tools and finding reliable health and wellness information. Once you complete a quick registration process, you can log in to:

- Find network doctors with DocFind®, the online provider directory.
- Take care of personal benefits business, from ordering replacement ID cards to checking on claims.
- Manage your health and health care with online tools. Take the online health assessment to know your health status, use the Member Payment Estimator and cost-of-care tools for estimates of medical procedures and tests, compare hospitals, and much more.
- Link to the latest health and wellness information at Aetna IntelliHealth® and Healthwise® Knowledgebase.
- Get personalized health information and messages through your Personal Health Record.

To register with Aetna Navigator, visit www.aetna.com, click on the *Register* link and follow the prompts. Need help? Ann, the Aetna Virtual Assistant, provides personal responses to members who need help logging in or registering for Aetna Navigator. She provides step-by-step answers to questions or issues such as "I forgot my user name" or "How do I reset my password?" Ann understands natural language, so you can ask questions in your own words and get a written and spoken response that's easy to understand and use.



Access health information wherever you are — with Aetna Mobile

Use your smartphone to access www.aetna.com and find in-network providers, view claims, check prescription costs, view your member ID card, contact Aetna by phone or e-mail, and much more. You can also download free apps, developed by Aetna, to access similar information:

- From the Apple iTunes App Store for your iPhone®, iPod touch® or iPad®.
- From the Android™ Marketplace for your Android smartphone.
- From Blackberry's App World for your Blackberry®.



*Your Life,
Your Health*

Your DoD NAF employer provides the benefits and programs described in this newsletter with *Your Life, Your Health* in mind. Take the time to learn about all the programs and services that are available to you.

